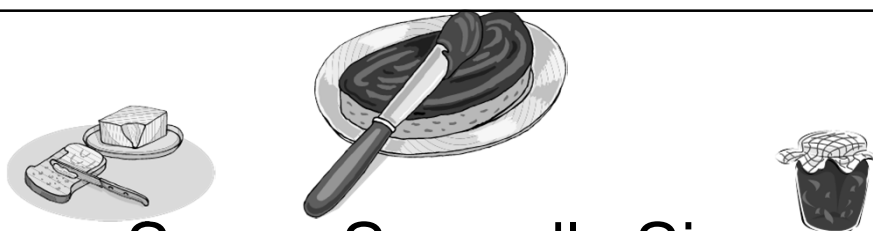




## Managing Spread and Creating Sustainability

*Carol Haraden*  
*September 11, 2012*

*This presenter has nothing to disclose.*



## Seven Spreadly Sins

*What not to do....if you want  
spread to occur!*



## Sin #1

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- Start with large pilots!
  - The whole organization is NOT a pilot site
  - PDSAs
  - Ramps of tests



## Sin #2

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- Find one person willing to do it all!
  - Vulnerabilities
  - Is this happening? Ask around...what would they do if Person X was not there?
  - Do they really have a process at all?



## Sin # 3


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- Be vigilant and **WORK HARDER!**
  - Reliability says....
  - How well can we do with this?
  - How reliable do processes need to be?



## Sin # 4

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- If a process worked in the pilot, then it should be spread **UNCHANGED!** 
- Customize the process, not the **OUTCOME**
- What we want (world-class performance) is standard; how to get there can be customized



## Sin # 5

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- Require the person who drove the pilot team to be responsible for organization-wide spread!
  - No good deed goes unpunished
  - Success depends on relationships, which are local
  - Infrastructure building
  - Spread is the responsibility of...



## Sin # 6

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- Look at defects on a QUARTERLY basis!
  - The pace of improvement is set by the pace of measurement
  - How ever often you measure now, take it down by two levels....

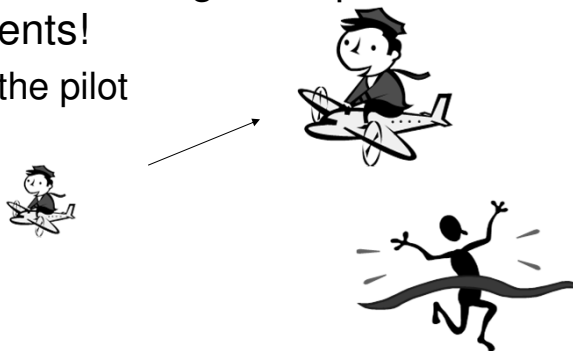


## Sin # 7

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- Early on, expect marked improvements in outcomes without regard to process improvements!

—Scale of the pilot



## A System for Spread

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- Roles and responsibilities
- Target population
- Promotion and communication
- Schedule for spread
- Review and guidance
- Control and sustain

## Readiness to Begin Spread of Changes

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- There is an intention to spread
- Improvements to be spread are key initiatives for the organization
- Executive leadership support
- The team that tested the change and implemented is relatively self sufficient



## Once you have a successful pilot...What do you do to spread the successful results?

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### Leaders:

1. Set the expectation for improvement everywhere that patients benefit (spread)
2. Create a successful prototype
3. Map out the target for spread (all ORs, all med-surg units, everywhere that has central lines) – spread plan
4. Study what the change requires
  1. Champion – who?
  2. Training and education
  3. Influence
  4. Coaching
  5. Data for feedback
  6. ENCOURAGEMENT



AND...

## Communication

	1	2	3	4	5	6	7
News letter							
board							
One on one							
MD leader mtg							
Nurse leader mtg							
Exec mtg							
other							

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## Now for the details...

- Who finds the champion?
- Who needs to be influenced and who can be the 'influencer'?
- Who can the team call when they need help?
- Who will track the spread?
- What will we do when it is slower than we want?
- When do you review the spread plan?
- Where do you post the spread plan?

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## Clarify “Where’ We Spread

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- What is the level of our ambition?
  - Every hospital
    - Every unit
  - Every service line
  - All primary care
  - All mental health



## Don't be a slave to the plan

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- You will learn a lot that may require a change to the plan:
  - change takes longer than you thought
  - some units want the change NOW
  - some never want it

